SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece. 	A. Received by (Please Print Clearly) B. Date of Delivery O. Signature Agent
or on the front if space permits.	Addressee Addressee
1. Article Addressed to: 9-16-02 * 02-284 Whitehall Enterprises, Inc.	B. Is delivery address different from item 1?
3400 Morgan Road Ann Arbor, MI 48108	
	3. Service Type Certified Mail
	A. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Copy from service label) PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952	
DOCKET NO. CER	ORDER DATED 19-10-02 FCC 02-25
CERTIFIED FCC MIMEOGRAPH NO. RETURN RECEIPT PROPERTED	
	PL PECKISTED
RETURN RECE	
NAME:	ENOUGH ROLLING
34M Margaret	
TOTAL	00 10 3 1 mm
Ann SHOPSKII	NSIO S